

LEA Name:

() FINAL REPORT
() PRELIMINARY REPORT

Indicate on the Table below the amount of REAP funds that were expended on each row's activities.

EXPENDITURES AND BUDGET TABLE								
Line	Object: Actual Alternative Program Activities Where Funds Were	[A] 100 Salaries	[B] 200 Employee Benefits	[C] 300 Purchased Services	[D] 400 Supplies & Materials	[E] 500 Capital Acquisitions	[F] TOTALS	[G] BALANCE
1	Title I, Part A - Targeted Assistance Programs	Budget						
		Exp\Obl						
2	Title I, Part A - Schoolwide Programs	Budget						
		Exp\Obl						
3	Title II, Part A - Teacher Quality Programs	Budget						
		Exp\Obl						
4	Title II, Part D - Education Technology Programs	Budget						
		Exp\Obl						
5	Title III, Part A - Limited English Instruction Programs	Budget						
		Exp\Obl						
6	Title IV, Part A - Safe and Drug-Free Schools Programs	Budget						
		Exp\Obl						
7	Title IV, Part B - 21st Century Learning Centers Programs	Budget						
		Exp\Obl						
8	Title V, Part A - Innovative Programs	Budget						
		Exp\Obl						
9	Column Totals	Budget						
		Exp\Obl						
				10 Indirect Costs		Budget		
						Exp\Obl		
Grand Total Expenditure must equal Line 18 below. →				11 Grand Total		Budget		
						Exp\Obl		
				12 STATE USE ONLY		Funds Not Budgeted		
						Unused Funds		
				13 STATE USE ONLY		Funds Released		
						Carryover		

Indicate in the Table below the amount of funds that were contributed from each funding source.

SOURCE OF FUNDS TABLE				STATE USE ONLY			
Line	ORIGINATING SOURCE OF FUNDS	REVENUE CODE	AMOUNT USED	Program	Unused Funds	Released	Carryover
14	Title II, Part A	4159		Title II, Part A			
15	Title II, Part D	4156		Title II, Part D			
16	Title IV, Part A	4176		Title IV, Part A			
17	Title V, Part A	4157		Title V, Part A			
18	TOTAL FUNDS USED (Must equal Total Expenditures amount on Line 11)			Totals			

19	REAP FUNDS RECEIVED	\$	
20	REAP WARRANTS IN PROGRESS	\$	
21	TOTAL REAP FUNDS RECEIVED AND WARRANTS IN PROGRESS	\$	
22	GRAND TOTAL EXPENDITURES AND OBLIGATIONS (from Line 11)	\$	
23	TOTAL DUE TO THE STATE (Line 21 minus Line 22)	\$	(Enter amount only if Line 21 exceeds Line 2
24	OUTSTANDING OBLIGATIONS (SUBMIT FINAL PCR WHEN LIQUIDATED)	\$	

CERTIFICATION: I declare and affirm under the penalties of perjury that this report has been examined by me and to the best of my knowledge and belief is in all things true and correct

Signature - Authorized Representative

Date